PATENT APPLICATION FEE DETERMINATION RECORD												ibei	
Effective October 1, 2000 09828149 017 - 39605 20													,
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL	THAN	
TOTAL CLÁIMS			: 18	<u> </u>			RATE		FEE	OR	RATE	FEE	
FOR			NUMBER F	ILED	NUM.B	ER EXTRA	BASIC	BASIC FEE 355.00		OR	BASIC FEE	710.00	÷
TOTAL CHARGEABLE CLAIMS			/8 min	us 20= *		Q.	X\$ 9)=		OR	X\$18=	_	
IND	EPENDENT CL	AIMS	<i>3</i> minus 3 =			Ð		X40=		OR	X80=		
ΜU	LTIPLE DEPEN	DENT CLAIM PI					.405			070			
* If the difference in column 1 is less than zero, enter "0" in column 2							+135=		OR	+270=			
TOTAL OR TOTAL 710 CLAIMS AS AMENDED - PART II OTHER THAN													
4-5-04 (Column 1) (Column 2) (Column 3)							SMA	LLE	ENTITY	OR	SMALL		
ENT A	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 77	Minus	J	0	= 3	X\$ 9) =	1	OR	X\$18=	5400	10
AME	Independent	. 0	Minus	رُ	3	0	X40)=	>	OR	X80=	1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												7	
TOTAL OR TOTAL 400													
41.	-12-04	(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT.	FEE		J • · · ·	ADDIT. FEE	<u> </u>	1
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENDMENT	Total	.31	Minus	2	3	= G	X\$ 9)=		OR	X\$18=	144.	PN
ME	Independent	· 3	Minus	2		=	X40)=		OR	X80=	7.1.13	10.
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												Ì
								TAL		OR	+270= TOTAL		
							ADDIT.			OR	ADDIT. FEE		•
<u>ک</u>	-17-04	(Column 1) CLAIMS	;		mn 2) IEST	(Column 3)					<u> </u>		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	BER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 32	Minus		31	=	X\$ 9) =		OR	X\$18=	18.	P()
	Independent	· 3	Minus	***	<u>3</u>	=	X40)=		OR	X80=		l
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1		-	1	+270=		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											1		
	If the "Highest Nu	mber Previously F Imber Previously F	Paid For" IN TH Paid For" IN TH	IS SPACE	is less that is less th	an 20, enter "20." an 3, enter "3."	ADDIT.	FEE		OR	ADDIT. FEE		1
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09/828149

CLAIMS AS FILED - PART I					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			(Column	1)	(Column 2)					OR I [
					14,2°,454		-	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		L	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L.	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART						(Column 3)		SMALL E	NTITY	OR.	OTHER SMALL I	
AMENDMENT #		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HÉST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	* 32	Minus	** 3	32	=		X\$ 9=		OR	X\$18=	
AME		<u>* 3</u>	Minus	***	3	=	LL	X42=		OR	X84=	
L	FIRST PRESE	VIAȚION OF MU	JLTIPLE DEP	ENDEN	I CLAIM		1 ,L	+140=		ÓR	+280=	i i
					-		L.	TOTAL		OR	TOTAL	
	(Column 1) (Colum					(Column 3)		DDIT. FEE		,	addit. Fee	***
	ng pagaman	(Column 1) CLAIMS		HIGI	HEST	(Column 3)	1 r		ADDI-			ADDI-
AMENDMENT B	American de la companya de la compan	REMAINING AFTER AMENDMENT		PREVI	MBER HOUSLY DFOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
4ME	Independent	*	Minus	***		=	┇	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		┚┞	+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		0011.122	<u>-</u>	_		
AMENDMENT C	4. 4	CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***		=	┧ ┠	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	IT ÇLAIM		┙┞	+140=		OR	+280=	·
. *	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2, wri	te "0" in co	olumn 3.	L	TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												